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APPLICATION NO. FILING DATE		FIRST NAMED INVENTO		ATTORNEY DOCKET NO.		CONFIRMATION NO.
10/750,626 TITLE OF INVENTION	12/18/2003 I: CORNER CUBE CHE	MICAL-BIOLOGICAL	Joanna Ptasiuski AGENT SENSOR		84930	- 9950
APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
· nonprovisional	NO	\$1400	\$0	\$0	\$1400	04/09/2007
EXAMINER ART		ART UNIT	CLASS-SUBCLASS			
CHERRY, EUNCHA P		2872	359-529000			
CFR 1.363). Change of corresp Address form PTO/S "Fee Address" inc PTO/S13/47; Rev 03-1-Number is required ASSIGNEE NAME A PLEASE NOTE: Un recordation as set for (A) NAME OF ASSI United by ti	dication (or "Fee Address 22 or more recent) attack attack and assignee is ident the in 37 CFR 3.11. Compared States of gan the Secretary of t	"Indication form need. Use of a Customer A TO BE PRINTED ON ified below, no assignee pletion of this form is NO	or agents OR, alternative (2) the name of a single registered attorney or a 2 registered patent attorney or a substitute for filing and (B) RESIDENCE: (CITY esented	3 registered patent attornively, e firm (having as a membringent) and the names of urneys or agents. If no namprinted. be) atent. If an assignee is it assignment. and STATE OR COUNT	ther a 2 mMIGHAE p to a minimum of the series 3 ALLAN dentified below, the dot of the series of the	L A. KAGAN Y. LEE
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